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FEC FORM 1

STATEMENT OF **ORGANIZATION**

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Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) onna Edwards for Senate Box 44305 ADDRESS (number and street) (Check if address is changed) Washington 20749 ZIP CODE CITY STATE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) info@donnaedwardsforsenate.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) www.donnaedwardsforsenate.com (Check if address is changed) 10° 2015 03 DATE C FEC IDENTIFICATION NUMBER IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Janice Edwards Type or Print Name of Treasurer 10° **2015** 03 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. For further information contact: Office **FEC FORM 1** Federal Election Commission Use (Revised 02/2009) Toll Free 800-424-9530 Only

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